

11 APR 2006

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	11					
2	11					
3	11					
4	11					
5	11					
6			21			
7	11		21			
8			21			
9			21			
10			21			
11	11					
12	11					
13	11					
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TOTAL IND.	8					
TOTAL DEP.	11	←	←	←	↓	↓
TOTAL CLAIMS	19.					

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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100						
TOTAL IND.						
TOTAL DEP.		←	←	←	↓	↓
TOTAL CLAIMS						

BEST AVAILABLE COPY